Actions for School Personnel, Parents or Guardian, and Students

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Section 2

Actions for School Personnel, Parents or Guardian, and Students

The health, safety, and educational progress of a student with diabetes depends on cooperation and collaboration among members of the school health team and the student's personal diabetes health care team. Working together, members of the school health team implement the provisions of the student's health care and education plans and provide the necessary assistance in the school setting. (Refer to the Primer for more information on the school health team (page 18) and the health care and education plans (page 21-26).

Health care plans include:

- Diabetes Medical Management Plan—Prepared by the student's personal diabetes health care team, this plan contains the medical orders for all aspects of the student's routine and emergency care. (See page 21 and sample plan, page 99.)
- Individualized Health Care Plan—Prepared by the school nurse, this plan specifies how diabetes care, as prescribed in the Diabetes Medical Management Plan, will be delivered in the school. (See page 22 and sample plan template, page 107.)

Members of the School Health Team
Student with diabetes
Parents/guardian
School nurse
Other school health care personnel
Trained diabetes personnel
Administrators
Principal
504/IEP coordinator
Office staff
Student's teacher(s)
Guidance counselor
Coach, lunchroom, and other school staff members

Members of the Student's Personal Diabetes Health Care Team Student with diabetes Parents/guardian Doctor Nurse Registered dietitian Diabetes educator Other health care providers involved with the student's care

• **Emergency Care Plans**—Prepared by the school nurse, these plans describe how to recognize and treat hypoglycemia or hyperglycemia and what to do in an emergency. (See page 24 and sample plans, pages 109-112.)

Education plans include the 504 plan, other education plan, or individualized education program (IEP). The education plan is developed to address the students' needs for services to manage diabetes safely and effectively in school, where required under Section 504 or the Individuals with Disabilities Education Act. (See page 24 and Section 4.)

The school nurse is the most appropriate person to implement the student's plans.

The school nurse is the most appropriate person to implement the student's plans. When a school nurse is not available, nonmedical personnel—called "trained diabetes personnel" in this guide—can be trained and supervised by a diabetes-trained health care professional such as the school nurse or a certified diabetes educator to safely provide and assist with diabetes care tasks in the school setting. These tasks may include blood glucose monitoring, insulin and glucagon administration, and urine or blood testing for ketones.

A diabetes-trained health care professional, such as the school nurse or a certified diabetes educator, is best qualified to train and supervise trained diabetes personnel assigned to provide routine or emergency care to a student with diabetes. Assignment of diabetes care tasks, however, must take into account State laws that may be relevant in determining which tasks may be performed by trained diabetes personnel.

Once it has been determined that a student-specific diabetes care task may be delegated, the school nurse should be involved in the decision making process to identify which school personnel are most appropriate to be trained. A diabetes-trained health care professional, such as a school nurse or a certified diabetes educator, develops and implements the training program, evaluates

the ability of trained diabetes personnel to perform the task, and establishes a plan for ongoing supervision throughout the school year. When trained diabetes personnel carry out tasks specified in the student's health care plans, under no circumstances should they make independent decisions about the daily, ongoing management of a student with diabetes.

In addition, to ensure that students with diabetes are safe, ready to learn, and able to participate in all school-sponsored events, all school personnel should receive training that provides a basic understanding of diabetes, how it is managed, how to recognize the signs and symptoms of hypoglycemia and hyperglycemia, and who to contact for help. See pages 27-31 for more information about training school personnel to facilitate effective diabetes management for students with diabetes.

What Actions Should School Personnel, the Parents or Guardian, and Students Take?

The following pages describe the actions and responsibilities of each key school staff member, the parents/guardian, and the student. One staff member may fill more than one role. For example, a teacher or a coach also may be a trained diabetes personnel.

The recommended actions do not represent legal checklists of what school personnel must do to comply with relevant **Federal and State laws.** Rather, they are steps that administrators, school nurses, school personnel, the parents/guardian, and students should take to ensure effective diabetes management at school.

How to Use the Actions Section

- Copy and distribute the Actions sheets on the following pages to the appropriate staff members, the parents/ guardian, and students with diabetes who are able to take responsibility for their self-management.
- Make copies of the Actions sheets for substitute personnel so that they understand their respective roles in diabetes management.
- Review the Actions sheets with school personnel during Level 2 and Level 3 diabetes management training to ensure that all staff members understand their roles and responsibilities.



for the School District Administrator

(Includes superintendent, 504/IEP coordinator, or other school administrator responsible for coordinating student services)

Understand and ensure compliance with the Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. (See Section 4.)
Provide leadership in developing district policy related to all aspects of diabetes management at school that is consistent with the standards of care recommended for children with diabetes and with Federal and State laws. This includes delegation of responsibilities, required staff training, medication administration, blood glucose monitoring, and activation of Emergency Medical Services (EMS) in case of a diabetes emergency on or off the school campus. Obtain input from local or regional experts on developing appropriate policies. (See the Resources section for organizations that offer standards of care for children with diabetes.)
Support implementation of district policy. Support school district health professionals and other school administrators regarding: 1) development, coordination, and implementation of diabetes management training; 2) ongoing quality control and improvement of these training programs; and 3) development and implementation of a program to monitor the performance of those who receive training. (See diabetes management training, pages 27-31.)
Allocate sufficient resources to help students with diabetes.
Monitor schools attended by students with diabetes for compliance with district policy.
Meet with members of the school health team, as needed. Address issues of concern about the provision of diabetes care by the school district, as appropriate.
Learn about diabetes by reviewing the materials contained in this guide and by participating in Level 1 training.
Treat the student with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.

Section 2



for the Principal, School Administrator, or Designee

Understand and ensure compliance with the Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973 the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4).
Participate in developing and implementing school policy related to diabetes management at school.
Implement policy on availability of trained staff for students with diabetes. Address the availability of the school nurse, another diabetes-trained health care professional, or trained diabetes personnel when the student is in school or participating in school-sponsored activities and events. Coordinate with the school nurse to identify staff members who will receive training to serve as trained diabetes personnel to assist with or perform diabetes care tasks. (See diabetes management training, pages 27-31.)
Implement the policy for activation of Emergency Medical Services (EMS) in case of a diabetes emergency on or off the school campus.
Develop and implement a system to inform school health services of the pending enrollment of a student with diabetes.
Participate in a meeting with the school health team, which includes the student, the parents/guardian, school nurse, trained diabetes personnel, the principal, office personnel, the 504/IEP coordinator, teacher(s), and other staff members who have responsibility for the student. (For a list of members of the school health team, see page 19.) Plan to schedule and attend a meeting of the school health team before the school year starts, when the child is newly diagnosed, or other times as appropriate, to discuss the health care-related services the student may need based on the student's Diabetes Medical Management Plan (DMMP).
Allocate sufficient resources for helping students with diabetes in the school setting, including resources for the three levels of diabetes management training described in this guide.

Actions for the Principal, School Administrator, or Designee Continued

Identify all staff members who have responsibility for the student with diabetes throughout the school day. Ensure that they receive the appropriate level of training and receive copies of the student's Emergency Care Plans informing them about the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) and who to contact in case of a diabetes emergency.
Alert all school staff members and all substitute personnel who teach or supervise the student with diabetes (including playground monitors, bus drivers, lunchroom personnel) about the student's needs. Ensure they are familiar with the services and emergency procedures contained in the student's health care plans, emergency care plans, and education plans.
Facilitate diabetes management training for school personnel as suggested in this guide (see pages 27-31). Arrange for a diabetes-trained health care professional such as the school nurse or a certified diabetes educator to plan and provide the three levels of diabetes management training for school personnel.
Learn about diabetes by participating in Level 1 training and by reviewing the information in this guide.
■ Be able to respond to signs and symptoms of hypoglycemia and hyperglycemia in accordance with the student's Emergency Care Plans. Know when and how to contact the school nurse or trained diabetes personnel, where emergency supplies are kept, and the procedures for handling emergencies.
Continue to work with the school health team to ensure implementation of the student's health care and education plans. Monitor compliance with these plans.
■ Support and facilitate ongoing communication between the parents/guardian of students with diabetes and the school health team.
Promote a supportive learning environment for students with diabetes to manage their diabetes safely and effectively at school. This includes enabling students to monitor blood glucose levels, administer insulin and other medications, eat snacks for routine diabetes management and for treating low blood glucose levels, have bathroom privileges and access to drinking water, participate in all school-sponsored activities, and provide accommodations for health care appointments or prolonged illnesses.
☐ Treat students with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.



for the School Nurse

When a school nurse is assigned to the school (or school district), he or she is the key school staff member who leads and coordinates the provision of health care services for a student with diabetes at school and at school-related activities. The school nurse, in collaboration with the principal, takes the lead in identifying, training, and providing ongoing supervision of trained diabetes personnel.

Diabetes technology, therapies, and evidence-based practice all are changing rapidly. The school nurse, who provides care to students with diabetes and facilitates diabetes management training for school personnel, has the professional responsibility to acquire and maintain current knowledge and competency related to diabetes management on a regular and ongoing basis. See the section on Training School Personnel in the Primer and the Resources section for information on training resources related to diabetes management in the school setting.

When notified that a student with diabetes is enrolled in the school, annually, or more often as necessary, the school nurse is responsible for the following actions.

Understand your role in ensuring compliance with Federal and State laws that may
apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973
the Americans with Disabilities Act, and the Individuals with Disabilities Education
Act. Understand the procedures for implementing these laws. (See Section 4.)
Understand State laws regarding delegation of nursing tasks.
Obtain and review the student's current Diabetes Medical Management Plan (DMMP) and other pertinent information from the student's parents/guardian.
Using the medical orders in the DMMP and information obtained from a thorough nursing assessment, develop an Individualized Health Care Plan (IHP).
Promote and encourage independence and self-care consistent with the student's
ability, skill, maturity, and development as indicated in the DMMP. After reviewing
the IHP with the parents/guardian and student, implement, review, and update the plan
throughout the school year as needed. (See sample IHP template on pages 107-108.)

Actions for the School Nurse Continued

Ш	Prepare the student's Emergency Care Plans for Hypoglycemia and
	Hyperglycemia based on the medical orders in the DMMP. (See sample plans, pages 109-112.) Provide copies of the emergency plans to all school personnel who have responsibility for the student with diabetes throughout the school day (for example, teachers, coach, physical education teacher, lunchroom staff, and bus driver).
	Facilitate the initial school health team meeting to discuss implementing the student's DMMP and IHP. Participate as a health expert on the teams that develop and implement the student's 504 Plan, other education plan, or Individualized Education Program. Monitor compliance with these health care and education plans and facilitate follow-up meetings of the school health team to discuss concerns, receive updates, and evaluate the need for changes to the student's plans, as appropriate.
	Plan and implement diabetes management training for the trained diabetes personnel and all staff members who have responsibility for the student with diabetes. Use the three levels of training described in this guide to design the diabetes management training and consider using standardized training materials that are available for training school personnel. See the section on Training School Personnel in the Primer (pages 27-31) and the Resources section for information on training resources related to diabetes management in the school setting. Ensure that all personnel mentioned in the health care and education plans know their roles in carrying out these plans, are trained in how to carry out their roles, know how their roles relate to each other, when and where to get help, where emergency supplies are kept, and the procedures for handling emergencies.
	Obtain materials and medical supplies necessary for performing diabetes care tasks from the parents/guardian. Arrange a system for notifying the student or the parents/guardian when supplies have expired or need to be replenished.
	Perform routine and emergency diabetes care tasks , including blood glucose monitoring, urine or blood ketone testing, insulin administration, and glucagon administration. Be aware of the policy on activating Emergency Medical Services in case of a diabetes emergency.
	Maintain accurate documentation of all diabetes care provided at school. Document communications with students, the parents/guardian, and the student's personal diabetes health care team, and document communications related to the training and supervision of trained diabetes personnel.

Actions for the School Nurse Continued

Provide ongoing education and training as the school year progresses for staff and new staff, as needed, and when the student's DMMP changes. (See the Resources section for organizations that provide training programs and materials.)
Assess competence and provide ongoing supervision of trained diabetes personnel in carrying out the health care tasks outlined in the student's health care and education plans.
Conduct ongoing, periodic assessments of the student with diabetes and update the IHP.
Help ensure that the student has a supportive learning environment and is treated the same as students without diabetes, except to respond to medical needs.
Distribute the Diabetes Primer in this guide to all school personnel who have responsibility for students with diabetes to ensure that they understand the basic elements of effective diabetes management and know how to recognize and respond to a diabetes emergency.
Provide education and act as a resource on managing diabetes at school to the student, family, and school staff.
Act as an advocate for students to help them meet their diabetes health care needs.
Assist the classroom teacher(s) with developing a plan for substitute teachers.
Assist the physical education teacher with managing the student's physical activity program at school.
Collaborate with coworkers and outside agencies (e.g., school district registered dietitian and food service manager, food service personnel) to obtain nutrition information for parents/guardian.
Communicate with the student's parents/guardian—and with their permission—communicate with the student's personal diabetes health care team about progress as well as any concerns about the student's diabetes management or health status, such as hypoglycemia episodes, hyperglycemia, general attitude, emotional issues, and self-management.
Treat the student with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.

Section 2



for the Trained Diabetes Personnel

With proper supervision and training, nonmedical school personnel or unlicensed assistive personnel, called trained diabetes personnel in this guide, can be trained and supervised to help students manage their diabetes safely at school. Trained diabetes personnel may include school staff members, health aides, and licensed practical nurses.

Depending on the size of the school, one or more school staff members should be trained to perform student-specific diabetes care tasks. Assignment of diabetes care tasks, however, must take into account State laws that may be relevant in determining what tasks may be performed by nonmedical personnel.

Once it has been determined that a student-specific diabetes care task may be delegated, the school nurse should be involved in the decision making process to identify which school personnel are most appropriate to be trained. A diabetes-trained health care professional, such as the school nurse or a certified diabetes educator, develops and implements the training program using standardized training materials such as those described in the section on Training School Personnel in the Primer, evaluates the ability of trained diabetes personnel to perform the task, and establishes a plan for ongoing supervision throughout the school year.

In general, the school nurse, in collaboration with the principal, takes the lead in identifying, training, and providing ongoing supervision of trained diabetes personnel. Ideally, the school nurse, another qualified health professional, or at least one of the trained diabetes personnel should be onsite during school hours and during school-sponsored activities that take place before, after school, or off campus in which a student with diabetes participates.

The specific roles and responsibilities of the trained diabetes personnel will be determined by the student's health care plans (the Diabetes Medical Management Plan prepared by the student's personal diabetes health care team and the Individualized Health Care Plan and Emergency Care Plans for Hypoglycemia and Hyperglycemia prepared by the school nurse) and education plan (504 Plan, other education plan, or Individualized Education Program). When trained diabetes personnel carry out tasks specified in the student's health care plans, under no circumstances should they make independent decisions about the daily, ongoing management of a student with diabetes.

Actions for the Trained Diabetes Personnel Continued

Understand your role in ensuring compliance with Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4.)
Participate in school health team meetings to discuss implementing the student's health care and education plans. (For a list of members of the school health team, refer to the Primer, page 19.)
Complete successfully the Level 3 training described in this guide and demonstrate competency in student-specific diabetes care tasks. See the section on Training School Personnel in the Primer (pages 27-31) and the Resources section for information on training resources related to diabetes management in the school setting. Refer to the information in this guide to help students with diabetes. Participate in additional education and training, as needed, or if the student's Diabetes Medical Management Plan (DMMP) changes.
Perform routine and emergency diabetes care tasks, including blood glucose monitoring, urine and/or blood ketone testing, insulin administration, and glucagon administration after receiving training under the direction of the school nurse or other assigned health care professional.
Know how to recognize the signs and symptoms of hypoglycemia and hyperglycemia, know where emergency supplies are kept, how to implement the student's Emergency Care Plans, and how to activate Emergency Medical Services (EMS) in case of a diabetes emergency. (See sample plans, pages 109-112.)
Document the diabetes care provided according to standards and requirements outlined by school policy.
Be available on campus during regular school hours and when the student participates in school-sponsored extracurricular activities held before or after school, as determined by the student's health care and education plans.
Accompany the student on field trips or to off-campus school-sponsored sports events and activities, as determined by the student's health care and education plans.
Communicate directly and regularly with the school nurse or the supervising health care professional.

Actions for the Trained Diabetes Personnel Continued

Consult with appropriate members of the school health team when questions arise
or the student's health status changes.
Help ensure that the student has a supportive learning environment and is treated the same as students without diabetes, except to respond to medical needs.
Treat the student with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.

Section 2



for the Teacher

Understand your role in ensuring compliance with Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws (see Section 4). Participate in school health team meeting(s). The teacher(s) who has primary responsibility for the student participates in the school health team meeting(s) when the student's health care plans (Diabetes Medical Management Plan, Individualized Health Care Plan, Emergency Care Plans for Hypoglycemia and Hyperglycemia) and education plan (504 Plan, other education plan, or Individualized Education Program) are discussed. (See page 19 for a list of members of the school health team and pages 21-26 for more information about these plans.) **☐** Work with other members of the school health team to implement the student's health care and education plans. Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend for carrying out your responsibilities and complete the training. Review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes. ☐ Recognize that a change in the student's behavior could be a symptom of blood **glucose changes**. Be aware that a student with low or high blood glucose levels may have some cognitive impairment. ☐ Be prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) in accordance with the student's Emergency Care Plans. These plans include information on when and how to contact the school nurse or trained diabetes personnel.

☐ Be aware of the policy for activating Emergency Medical Services (EMS) in case

where students with diabetes normally keep their supplies.

of a diabetes emergency. Know where supplies to treat low blood glucose are kept and

Actions for the Teacher Continued

Provide a supportive learning environment for students with diabetes to manage their diabetes safely and effectively at school. This includes enabling students to monitor blood glucose, administer insulin and other medications, eat snacks for routine diabetes management and for treatment of low blood glucose levels, have bathroom privileges, access to drinking water, and participate in all school-sponsored activities.
☐ Provide accommodations for students with diabetes such as alternative times and arrangements for exams and permission for absences—without penalty—for health care appointments and prolonged illness, as indicated in the student's health care and education plans.
■ Provide instruction to the student if he or she misses school and opportunities to make up missed classroom assignments or exams due to diabetes-related care or illness.
Recognize that eating meals and snacks on time is a critical component of diabetes management. Failure to eat lunch on time could result in low blood glucose levels, especially if a student has missed a morning snack or has had a physically strenuous or otherwise active morning at school.
Provide information for substitute teachers about the day-to-day and emergency needs of the student. Leave a copy of the Emergency Care Plans for Hypoglycemia and Hyperglycemia readily available.
Notify the parents/guardian in advance of changes in the school schedule such as class parties, field trips, and other special events.
Communicate with the school nurse, trained diabetes personnel, or the parents/guardian regarding the student's progress or any concerns about the student.
☐ Treat the student with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.

Please copy and distribute to the Physical Education Teacher, the Coach, Athletic Trainer, and if appropriate, to the playground/campus supervisor.



for the Physical Education Teacher, the Coach, and Athletic Trainer

Understand your role in ensuring compliance with Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4.) **■** Work with other members of the school health team to implement the student's health care and education plans. Health care plans include the Diabetes Medical Management Plan, Individualized Health Care Plan, and Emergency Care Plans for Hypoglycemia and Hyperglycemia; the education plan includes the 504 Plan, other education plan, or Individualized Education Program. ☐ Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend for carrying out your responsibilities and complete the training. Review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes. (See pages 54-55 about physical activity and participation in team sports.) ☐ Make sure blood glucose monitoring equipment and a quick-acting form of glucose are available at all activity sites. ☐ Allow the student to monitor blood glucose levels and/or administer insulin, as outlined in the student's health care plans and education plans. ☐ Recognize that a change in the student's behavior could be a symptom of blood glucose changes. ☐ Understand and be aware that hypoglycemia (low blood glucose) can occur during and after physical activity.

Actions for the Physical Education Teacher, the Coach, and Athletic Trainer *Continued*

☐ Be prepared to respond immediately to the signs and symptoms of hypoglycemia
(low blood glucose) and hyperglycemia (high blood glucose). Take initial actions to treat hypoglycemia by providing the student with immediate access to a quick-acting form of glucose in accordance with the student's Emergency Care Plan for Hypoglycemia. This plan includes information on when and how to contact the school nurse or trained diabetes personnel. Be aware of the school's policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.
■ Bring a quick-acting form of glucose to the gym or practice field (e.g., 3 or 4 glucose tablets or 1 tube of glucose gel or 4 ounces of fruit juice (not low-calorie or reduced sugar) or 6 ounces of soda (not low-calorie or reduced sugar), as outlined in the student's health care and education plans. Consider taping glucose tablets to your clipboard.
☐ Include the student's Emergency Care Plans for Hypoglycemia and Hyperglycemia and diabetes supplies in the First Aid pack that goes out to physica education activities, practices, and games.
☐ Allow students with diabetes to wear their medical ID during physical activity.
Provide input to the student's school health team as needed. (For a list of members of the school health team, see page 19.)
☐ Communicate with the school nurse and/or trained diabetes personnel regarding any observations or concerns about the student.
Provide information to the substitute physical education teacher about the day-to day and emergency needs of the student. Leave copies of the Emergency Care Plans for Hypoglycemia and Hyperglycemia and supplies readily available.
■ Encourage the same level of participation in physical activities and sports for students with diabetes as for other students, except to meet medical needs.
☐ Treat the student with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.



Ensure that the student with diabetes has timely access to food and sufficient time to finish eating. Under certain circumstances, supervisory lunch personnel may need to encourage the student to go to the front of the line and eat appropriate foods.
Obtain a copy of the student's Emergency Care Plans for treating hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) and keep them in a known, yet secure, place in the lunchroom.
Ensure that you and your staff understand your roles in ensuring compliance with Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4.)
Ensure that you and your staff work with the school health team to implement the student's written health care and education plans. Health care plans include the Diabetes Medical Management Plan, Individualized Health Care Plan, and Emergency Care Plans; the education plan includes the 504 Plan, other education plan, or Individualized Education Program.
Consult with the school nurse and the principal to determine the appropriate level of diabetes management training that you and your staff should attend for carrying out your responsibilities and complete the training.
Ensure that you and your staff review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes. (See pages 50-54 for more information about meal plans and nutritional needs of students with diabetes.)
Obtain a copy of the student's meal plan from the health care plans developed by the student's personal diabetes care team and the school nurse.
Provide breakfast and lunch menus and a meal schedule in advance to the student's parents/guardian, including grams of carbohydrates and other necessary nutritional information for each meal or snack. If you or the school district do not have this information, the school can identify a registered dietitian through the local chapter of the American Dietetic Association who can work with food service staff to make this information available for students with diabetes.

Actions for the Food Service Manager Continued

Ensure that your staff recognizes that eating meals and snacks on time is a critical component of diabetes management. If students with diabetes fail to eat lunch on time, they could develop hypoglycemia (low blood glucose), especially if they have missed a morning snack or have had a physically strenuous or otherwise active morning at school.
Ensure that your staff recognizes that a student's behavior change could be a symptom of blood glucose changes.
Ensure that you and your staff are prepared to respond immediately to the signs and symptoms of hypoglycemia and hyperglycemia, and take appropriate action in accordance with the student's Emergency Care Plans. Know when and how to contact the school nurse or trained diabetes personnel for help. Be aware of the school's policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency.
Ensure that you and your staff know where supplies (e.g., 3 or 4 glucose tablets or 1 tube of glucose gel or 4 ounces of fruit juice (not low-calorie or reduced sugar) or 6 ounces of soda (not low-calorie or reduced sugar) are kept to treat hypoglycemia (e.g., with the student or in another place).
Provide input to the school health team when requested.
Communicate with the school nurse and/or trained diabetes personnel regarding the student's progress or any concerns about the student.
Ensure that your staff treats the student with diabetes the same as other students, except to respond to their medical needs.
Ensure that your staff respects the student's confidentiality and right to privacy.



for the Transportation Manager

Inform drivers about which students on their bus routes have diabetes, consistent with the student's right to privacy and confidentiality.
Ensure that drivers understand their role in ensuring compliance with Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4.)
Consult with the school nurse and the principal to determine the appropriate level of diabetes management training that drivers should attend for carrying out their responsibilities and ensure that they complete the training.
Ensure that drivers obtain a copy of the student's Emergency Care Plans for Hypoglycemia and Hyperglycemia and keep them on the bus in a known, yet secure place. Ensure that the plans are readily available for substitute drivers.
Ensure that drivers recognize that a student's behavior change could be a symptom of blood glucose changes.
Ensure that drivers are prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) and take initial actions in accordance with the student's Emergency Care Plans. These plans include information on when and how to contact the school nurse, trained diabetes personnel, and Emergency Medical Services (EMS).
Ensure that drivers keep supplies to treat low blood glucose on the bus (e.g., 3 or 4 glucose tablets or 1 tube of glucose gel or 4 ounces of fruit juice (not low-calorie or reduced sugar) or 6 ounces of soda (not low-calorie or reduced sugar) and are aware of where students with diabetes normally keep their supplies.
Ensure that drivers understand and are aware that hypoglycemia (low blood glucose) can occur at any time—in the beginning of the day, on a field trip, or when children are going home.
Ensure that drivers allow the student with diabetes to eat snacks and drink beverages on the bus.

Actions for the Transportation Manager Continued

Ensure that drivers communicate with the school nurse, trained diabetes person
nel, and other members of the school health team regarding the student's progress
as well as any concerns.
Ensure that drivers treat the student with diabetes the same as other students,
except to respond to their medical needs.
Ensure that drivers respect the student's confidentiality and right to privacy.



If you are informed that students on your bus route have diabetes, understand that you may have certain responsibilities relating to those students.
Know that Federal and State laws may apply to students with diabetes and management of their disease.
Attend diabetes management training required by your supervisor to learn more about diabetes and to understand what you need to do.
Obtain copies of the student's Emergency Care Plans for Hypoglycemia (low blood glucose) and Hyperglycemia (high blood glucose) from the school nurse and keep them on the bus in a known, yet secure, place. Leave the plans readily available for substitute drivers.
Understand that a change in the student's behavior could be a symptom that the student's blood glucose is too high or too low.
Understand and be aware that low blood glucose (sugar) is a serious condition that can happen suddenly and requires immediate treatment. It can occur at any time—in the beginning of the day, on a field trip, or when children are going home.
Be prepared to respond immediately to the signs and symptoms of hypoglycemia and hyperglycemia. Look over the student's Emergency Care Plans for instructions on what to do and when and how to contact the school nurse or trained diabetes personnel. Be aware of the policy for activating Emergency Medical Services (EMS) in case a student has a diabetes emergency.
Keep supplies to treat low blood glucose on the bus (for example, 3 or 4 glucose tablets or 1 tube of glucose gel or 4 ounces of fruit juice (not low-calorie or reduced sugar) or 6 ounces of soda (not low-calorie or reduced sugar), and be aware of where students with diabetes normally keep their supplies.
Allow students with diabetes to eat snacks and drink beverages on the bus because they may be needed at certain times to help manage their diabetes.
Communicate with the school nurse, trained diabetes personnel, and other members of the school health team regarding the student's progress as well as any concerns. (See page 19 in the Primer for members of the school health team.)

Section 2

Actions for the Bus Driver Continued

Treat the student with diabetes the same as other students, except to respond to
their medical needs.
Respect the student's confidentiality and right to privacy.



for the School Psychologist, Counselor, and Social Worker

☐ Understand your role in ensuring compliance with Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4.) **■** Work with the school health team to implement the student's health care and education plans. Health care plans include the Diabetes Medical Management Plan, Individualized Health Care Plan, and Emergency Care Plans for Hypoglycemia and Hyperglycemia; the education plan includes the 504 Plan, other education plan, or Individualized Education Program. Consult with the school nurse and the principal to determine the appropriate level of diabetes management training you should attend for carrying out your responsibilities and complete the training. Review the information about diabetes in this guide and refer to it, as needed, to help the student with diabetes. ☐ Be prepared to respond immediately to the signs and symptoms of hypoglycemia (low blood glucose) and hyperglycemia (high blood glucose) in accordance with the student's Emergency Care Plans. These plans include information on when and how to contact the school nurse or trained diabetes school personnel. Be aware of the policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency. ☐ Participate in school health team meetings and communicate with the school nurse, trained diabetes personnel, and the parents/guardian regarding the student's progress or any concerns about the student. **■** Work with school staff to promote a supportive learning environment for students with diabetes. **Ensure that the student with diabetes is treated the same as students without diabetes**, except to respond to medical needs. ☐ Be aware of and be prepared to respond to the emotional needs of the student. Children react differently to having diabetes. Some are accepting and open to discussing it; others are resentful and may attempt to hide it. Often, a child will experience both types of feelings. Be aware of the student's feelings about having diabetes and

Actions for the School Psychologist, Counselor, and Social Worker Continued

identify ways to ensure the student is treated the same as other students. (See "Dealing with Emotional and Social Issues," pages 58-59.)
Recognize that students with chronic illnesses such as diabetes may rebel by discontinuing all or part of their medical regimen. For example, some adolescents may stop testing their blood glucose or give their parents/guardian and health care providers incorrect information about their blood glucose levels.
Be aware that some students may not wish to share information about their diabetes with other students or school staff, particularly if it makes them feel different from others.
Promote and encourage independence and self-care consistent with the student's ability, skill, maturity, and development.
Treat the student with diabetes the same as other students, except to respond to their medical needs.
Respect the student's confidentiality and right to privacy.



for the Parents/Guardian

■ Notify the school principal as well as the school nurse, guidance counselor, and teacher(s) that your child has diabetes when the student enrolls in school or is newly diagnosed with the disease. Work with your child's personal diabetes health care team to develop a Diabetes Medical Management Plan that contains the medical orders for your child. Use the sample plan in this guide as an example of the information to include. (See pages 99-106.) **Submit the signed Diabetes Medical Management Plan from your child's personal** diabetes health care team to the school nurse or other member of the school health team as soon as possible after your child has been diagnosed with diabetes, at the beginning of each school year, and when there are changes in your child's diabetes care plan. Permit sharing of medical information necessary for your child's safety between the school and your child's health care providers. Talk with your child's personal diabetes health care team about communicating with the school health team and responding to student emergencies as they occur. Provide accurate and current emergency contact information to the school, and update the school about any changes. ☐ Obtain completed copies from the school nurse of your child's Emergency Care Plans for Hypoglycemia and Hyperglycemia based on the medical orders in the Diabetes Medical Management Plan. These plans inform school personnel about the symptoms of low and high blood glucose, what to do, and who to contact in case of an emergency. Be aware of the school's policy for activating Emergency Medical Services (EMS) in case of a diabetes emergency (see sample plans, pages 109-112). **⚠** Attend and participate in the initial and annual meetings of the school health team to discuss implementing the medical orders in your child's Diabetes Medical Management Plan, to review the services your child may need, and to develop a 504 Plan, other education plan, or Individualized Education Program. The education plan is developed to manage the student's diabetes safely and effectively in school, where required under Section 504 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act. The school health team generally includes the student,

Actions for the Parents/Guardian Continued

the parents/guardian, school nurse, principal, 504/IEP coordinator, teachers, and other school personnel who have responsibility for your child during the school day. (See pages 21-26 for more information about the education plans.)
Be knowledgeable about Federal and State laws that may apply to students with diabetes, including Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, and the Individuals with Disabilities Education Act. Understand the procedures for implementing these laws. (See Section 4.)
Review the information in this guide about effective diabetes management in the school setting and refer to it, as needed, to help your child and to work collaboratively with your child's personal diabetes health care team and the school health team.
Check the Resources section of this guide for organizations that can help you and your child with managing diabetes in the school setting.
Provide specific information to the school health team about your child's diabetes and performance of diabetes care tasks at home.
Inform the school nurse or designated school staff about any changes in your child's health status or medical orders.
Provide all supplies and equipment necessary for implementing your child's health care and education plans. These include blood glucose monitoring equipment, supplies for insulin administration and urine and blood ketone testing, snacks, quickacting glucose products, and a glucagon emergency kit.
Consult with the school nurse to monitor supplies and replenish them, as needed; refill or replace supplies that have expired.
Provide and maintain all supplies and equipment necessary to accommodate your child's long-term needs (72 hours) in case of a disaster or emergency. (See page 49 for information about disaster planning supplies).
Inform appropriate school staff (principal, teachers, coaches, and others) when your child plans to participate in school-sponsored activities that take place before or after school or off campus so that health care coverage can be coordinated to ensure your child's health and safety.
Respect your child's confidentiality and right to privacy.



for the Student with Diabetes

- Find out who is on the school health team—the people who will be helping you with your diabetes care. Know how to contact them if you need help. Participate in the school health team meetings to talk about your diabetes management plan and your health care and education plans. ☐ Always wear a medical alert ID. Always carry a quick-acting source of glucose as recommended by your health care team. ☐ Tell your teachers and other school staff members if you feel symptoms of low or high blood glucose, especially if you need help. Work with the school health team members if you need help monitoring your blood glucose, getting insulin, or eating the right amount of food, at the right time, during the school day. ☐ Take charge of your diabetes care at school, as allowed in your health care and **education plans.** You may be responsible for these diabetes care tasks:
 - Checking and writing down blood glucose levels.
 - Figuring out the correct insulin dose you need.
 - Giving yourself insulin.
 - Discarding your syringes and lancets in a proper container or taking them home with you according to your written care plans.
 - Throwing away needles, lancets, and other supplies you have used in a safe place.
 - Eating meals and snacks as planned.
 - Figuring out the carbohydrate (carb) content of food.
 - Treating low blood glucose with a quick-acting glucose product.
 - Carrying diabetes equipment and supplies with you at all times.

Actions for the Student with Diabetes Continued

Things You Need To Know:

- 1. What your health care and education plans say about the help you will receive to manage your diabetes, which people at school will help you, and what is expected of you.
- 2. Who to contact and what to do when your blood glucose is too low or too high or you are not feeling well.
- 3. When you should monitor your blood glucose levels, give yourself insulin, have a snack, eat a meal, and who to ask for help.
- 4. Where your daily and emergency diabetes supplies are stored if you don't carry them and who to contact when you need to use the supplies or when you need help.